

OPG Representative Payee Account for Benefit of Wards

Check Issue File Format

DATA TRANSMISSION INPUT CHECK RECONCILIATION SERVICE RECON POSITIVE PAY SERVICE

DETAIL RECORD LAYOUT:

<u>FIELD NAME</u>	<u>FIELD LENGTH</u>	<u>FIELD TYPE</u>	<u>POSITIONS</u>		<u>DESCRIPTION</u>
			<u>FROM</u>	<u>TO</u>	
Account Number	10	N	01	10	
Check Number (*)	10	N	11	20	Right Justify - Zero Fill
Issue Date	06	N	21	26	MMDDYY
Check Amount	10	N	27	36	Zero Fill, No Decimal Point
Filler	02	A	37	38	Spaces/Blanks
Transaction Code	01	N	39	39	0 = Issue 1 = Void (Zero Check Amount) 1 = Cancel (Issued Check Amount)
Record Code	01	A	40	40	"T"

*These digits should be the same as those printed in magnetic ink on the check.